#### INDEX BIBLIOGRAPHIQUE

#### DES TRAVAUX CONCERNANT LA RHUMATOLOGIE ET LES AFFECTIONS OSTÉO-ARTICULAIRES

3° TRIMESTRE 1978

La Revue du Rhumatisme publie trimestriellement un index bibliographique rhumatologique réalisé grâce au concours du Docteur Claude Guérin et du Professeur agrégé A. Dryll.

Les références sont relevées dans les publications suivantes :

#### FRANCE:

Annales de Médecine de Reims.
Annales médicales de Nancy.
Annales de Médecine physique. Paris.
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Annales de Radiologie, Paris.
Archives d'Anatomie et de Cytologie pathologique,
Paris.
Archives Médicales de l'Ouest, Angers, Brest, Nantes,
Rennes.
Bordeaux médical.
Bulletin de l'Académie Nationale de Médecine, Paris.
Cahiers de Médecine, Paris.
Concours médical, Paris.
Gazette médicale de France, Paris.
Journal de Médecine de Besançon.
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Journal de Médecine de Lyon. Journal de Médecine de Strasbourg. Journal de Radiologie et d'Electrologie. Paris. Lille médical.

Lyon médical.

Méditerranée medicale, Marseille.

Montpellier médical.

Annales de Chirurgie, Paris. Annales de Biologie clinique, Paris.

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Réadaptation, Paris.

Revue de Chirurgie orthon

Revue de Chirurgie orthopédique et réparatrice de l'Appareil moteur, Paris. Revue de Médecine, Paris.

Revue de Médecine de Toulouse. Revue Méditerranéenne des Sciences médicales, Marseille, Nice, Montpellier.

Revue du Praticien, Paris. Revue du Rhumatisme, Paris. Rhumatologie, Aix-les-Bains. Semaine des Hôpitaux, Paris. Thérapeutique, Paris.

#### ALLEMAGNE :

Anatomica Clinica, Berlin.

Deutsche medizinische Wochenschrift, Stuttgart.
Zeitschrift für Rheumatologie, Darmstadt.

#### ANGLETERRE :

Annals of the rheumatic Diseases, London.
British Medical Journal, London.
Clinical Radiology, London.
Clinics in Rheumatic Diseases, London.
Journal of Bone and Joint Surgery, London.
Lancet, London.
Journal of the Royal Society of Medicine, London.
Rheumatology and Rehabilitation, London.

#### BELGIOUE :

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#### CANADA :

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#### ESPAGNE :

Revista española de Reumatologia, Barcelona. Revista española de Reumatismo, Barcelona.

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American Journal of Medicine, New York.
Annals of internal Medicine, Lancaster.
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New England Journal of Medicine, Boston. Mayo Clinic Proceedings, Rochester. Radiology, Syracuse.

Seminars in Arthritis and Rheumatism, New York. Skeletal Radiology, New York.

#### ITALIE :

Annali di Reumatologia, Roma. Minerva ortopedica, Torino. Archivio di ortopedia e reumatologia, Milano.

#### JAPON :

Journal of the Japan Rheumatism Association, Tokio.

#### SCANDINAVIE :

Acta orthopaedica scandinavica, Kobenhaven. Scandinavian Journal of Rheumatology, Stockholm

#### SUISSE :

Médecine et Hygiène, Genève.

#### PATHOLOGIE OSSEUSE

Généralités sur l'os et le tissu osseux.
Ostéites infectieuses, mycosiques, parasitaires.
Ostéopathies, chondropathies génotypiques.
Malformations osseuses d'origine génétique.
Ostéopathies par intoxication métallique.
Ostéopathies par agents physiques.
Ostéoporoses.

Troubles du métabolisme phospho-calcique Généralités.

Ostéomalacies. Rachitisme. Ostéopathies d'origine rénale.

Hyperparathyroïdie et hypoparathyroïdie. Autres ostéopathies de cause endocrinienne.

Ostéopathies au cours des affections du sang et du système réticulo-endothélial.

Ostéopathies post-traumatiques.

Nécroses aseptiques des os.

Tumeurs des os.

Ostéopathies de nature inconnue.

Divers.

#### PATHOLOGIE ARTICULAIRE

L'articulation normale : structure, physiologie, investigations.

Généralités sur la pathologie articulaire.

Séro-immunologie rhumatismale.

Rhumatisme articulaire aigu.

Polyarthrite rhumatoïde.

Polyarthrites infantiles.

Rhumatisme psoriasique.

Rhumatisme inflammatoire des ceintures.

Collagenoses.

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Arthrites infectieuses bactériennes.

Arthrites virales.

Maladie de Fiessinger-Leroy-Reiter et autres rhumatismes avec entéropathie.

Arthrites mycosiques et parasitaires.

Arthrites de causes diverses.

Coxarthrose et affections propres à la hanche.

Gonarthrose et affections propres au genou.

Autres arthroses et processus arthrosique.

« Périarthrite de l'épaule », tendinite, bursite, capsulite rétractile.

Pied: troubles statiques.

Algo-neurodystrophie décalcifiante.

Arthropathies nerveuses.

Goutte.

Autres arthropathies métaboliques, chondrocalcinose.

Arthropathies par affections du sang et de la moelle osseuse.

Arthropathies para-néoplasiques,

Arthropathies post-traumatiques.

Tumeurs des articulations.

Malformations articulaires.

Arthropathies de nature inconnue.

Divers.

#### PATHOLOGIE VERTÉBRALE

Anatomie, physiologie, investigations.

Pelvi-spondylite rhumatismale (spondylarthrite ankylosante).

Tuberculose vertébrale.

Autres spondylites et spondylo-discites microbiennes. Arthrose vertébrale : généralités.

Cervicarthrose.

Dorsarthrose.

Lombarthrose.

Disque intervertébral (voir aussi sciatique).

Malformations congénitales de croissance.

Dystrophies vertébrales de croissance.

Troubles statiques vertébraux.

Localisations vertébrales des maladies génétiques.

Localisations vertébrales des maladies osseuses de cause inconnue (Maladie de Paget, Dysplasie fibreuse).

Tumeurs rachidiennes.

Tumeurs intrarachidiennes.

Traumatismes vertébraux.

Sciatiques (voir aussi disque intervertébral).

Algies cervico-brachiales.

Autres algies d'origine vertébrale.

Divers.

#### PATHOLOGIE JUXTA-ARTICULAIRE

Structure, physiologie, investigations des tendons et Hanche : tendinite, etc.

organes de glissement. Affections des tendons et organes de glissement : Cheville-pied : tendinite, etc. généralités.

Coude: tendinite, etc.

Poignet-main: tendinite, canal carpien, etc.

Genou: tendinite, etc.

Maladie des muscles.

Divers.

#### **THÉRAPEUTIQUE**

Thérapeutique médicale : généralités.

Cortisoniques. Chimiothérapie.

Immunothérapie.

Synoviorthèses.

Traitements physiques et rééducation.

Traitements chirurgicaux.

Divers.

AUX CONFINS DE LA RHUMATOLOGIE - PSYCHALGIES ÉTUDES BIOLOGIQUES DE L'INFLAMMATION PROBLÈMES IMMUNOLOGIQUES DIVERS

#### PATHOLOGIE OSSEUSE

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#### Ostéopathies au cours des affections du sang et du système réticulo-endothélial

BATAILLE R., MORLOCK G., ROSENBERG F., SANY J., SERRE H. - Chimiothérapie du myélome multiple des os :

# diprostène

sa rapidité d'action n'est pas son seul avantage...



«dans 93% des cas la tolérance locale est excellente avec en particulier absence de douleur après l'injection»

# diprostène

corticoïde retard à usage local en seringue pré-remplie

forme et présentation : Suspension injectable, nécessaire contenant 1 seringue pré-remptie de1 mil + 2 aiguilles stériles à usage unique, composition : nat seringue.

Betaméthasone dipropionate : 6,43 mg (correspondant à 5 mg de betaméthasone alcool),

Betaméthasone phosphate disodique : 2,63 mg (correspondant à 2 mg de betaméthasone alcool).

Excipient : phosphate disodique, chlorure de sodium, polysorbate 80 tétracémate disodique, alcool benzylique, P. oxybenzoate de méthyle, P. oxybenzoate de propyle, carboxyméthylcellulose sodique, polyéthylène glycol 4000, eau pour préparation injectable.

propriétés : Corticothérapie locale et anti-inflammatoire.

indications: Celles de la voie locale, par voie intra-articulaire et péri-articulaire : a) arthroses de localisations diverses et notamment celles du genou; b) affections intra-articulaires et péri-articulaires et péri-articulaires et notamment péri-arthrites de l'épaule, tendinites; c) névralgies : sciatiques.

contre-indications: Ce sont celles de la corticothérapie par voie générale en particulier le diabète acido-acêto sique, l'ulcère gastro-duodénal en période évolutive, la tuberculose en évolution et les infections à virus neurotropes (varicelle, zona, herpès de la cornée), certaines psychoses... Diprostène ne doit pas être injecté par voie intra-veineuse.

précautions: Il y a lieu de respecter une asepsie rigoureuse et une technique appropriée à l'injection. La seringue pré-remplie est prête à l'emploi : il suffit de mettre en place de façon aseptique l'une des deux aiguilles à usage unique et d'agiter la seringue pour remettre les micro-cristaux en suspension. Comme pour tout corticoïde, il convient de tenir compte plus particulièrement dés perturbations métaboliques, des effets neuro-psychiques, des troubles digestifs et de l'aggravation des malades infectieuses. Surveillance médicale habituelle des malades recevant des injections locales de corticoïdes.

mode d'emploi et posologie: La boîte scellée ne doit être ouverte que par le mèdecin au moment de l'emploi. La posologie et la durée du traitement varient selon les indications: une injection de 1 ml (le contenu d'une seringue) toutes les 2, 3 ou 4 semaines. Selon le lieu de l'injection et l'affection à traiter, une quantité plus faible (1/2 seringue) ou plus forte (2 seringues) peut être injectée.

Tableau A - A.M.M. 320.050.9. - Prix: 15,35 F + S.H.P. - Remb. Séc. Soc. à 70 % et Collect.

DPT. PR 5 bis. 78.10. FR marque déposée mag ferry

## NAPROSYNE: anti-inflammatoire majeur non stéroïdien



### comprimés à 250 mg

Boîte de 12 comprimés dosés à 250 mg de Naproxen. Prix : **13,75 F** + s.h.p. A.M.M. n° 316 844.4. Tab. C. Remboursé S.S. - Agréé aux collectivités.

#### Indications

Rhumatismes inflammatoires • Polyarthrite rhumatoïde • Pelvi-spondylite rhumatismale.

Rhumatismes dégénératifs en poussée • Arthroses de toute localisation en particulier : Coxarthrose, Gonarthrose

Rhumatismes ab-articulaires • Péri-arthrite scapulo humérale • Tendinite • Bursite • Lumbago.

Sciatiques • Cervico-brachiales.

#### Goutte.

#### Contre-indication

• Ulcère gastro-duodénal en évolution.

de l'insuffisant rénal grave s'impose.

#### Précautions d'emploi

L'emploi de ce médicament est déconseillé : • chez les malades présentant des antécédents digestifs notamment de type ulcéreux.

• chez la femme enceinte bien que les études chez l'animal n'aient pas révélé d'action tératogène. Une surveillance du malade sous anti-coagulant et Laboratore Coverne
3, squire Dean
75013 - Paris

CASSENNE 3, square Desaix 75015 Paris. Tél. 578.61.70

## suppositoires à 250 mg

Boîte de 12 suppositoires dosés à 250 mg de Naproxen. Prix : **16,05 F** + s.h.p. A.M.M. N° 319 773.0. Tab. C. Remboursé S.S.- Agréé aux collectivités.

naprosyne

- 1 comprimé le matin 1 comprimé le soir, ou
- 1 comprimé le matin
- 1 suppositoire le soir, ou
- 1 suppositoire le matin 1 suppositoire le soir.

Les comprimés seront avalés de préférence au moment des repas.



nouvelle approche par une méthode quantitative de surveillance. Commentaires critiques à propos de 22 malades. Rev. médit. Sci. méd., 1978, 3, 299-306.

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